



1-13-04

2621

PTO/SB/21 (08-03)

Approved for use through 07/31/2006. OMB 0651-0031

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## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

|  |                      |                        |          |
|--|----------------------|------------------------|----------|
| Application Number                       | 09/649,499           |                        |          |
|  | Filing Date          | August 28, 2000        |          |
|  | First Named Inventor | JONES                  |          |
|  | Art Unit             | 2621                   |          |
|  | Examiner Name        | Tom Y. Lu              |          |
| Total Number of Pages in This Submission | 8                    | Attorney Docket Number | 26242.00 |

### ENCLOSURES (check all that apply)

|   |  |   |
|---|--|---|
| <input type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input checked="" type="checkbox"/> Amendment / Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Response to Missing Parts/ Incomplete Application<br><input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication to Group<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):<br><b>Return Receipt Postcard</b> |
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Remarks

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### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

|                         |                   |
|-------------------------|-------------------|
| Firm or Individual name | Jeffrey N. Cutler |
| Signature               |                   |
| Date                    | 01/12/04          |

### CERTIFICATE OF MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

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| Typed or printed name | Express Mail Number: EV 416351045 US |
| Signature             | Date                                 |

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DBWIA  
1-23-04

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl No. : 09/649,499  
Applicant : William F. Jones  
Filed : 08/28/2000  
TC/A.U. : 2621  
Examiner : Tom Y. Lu  
Docket No. : 26242.00  
Customer No. : 22465

Confirmation No. 8209

Assignee : CTI PET Systems, Inc.  
Title : On-Line Correction of Patient Motion In Three-Dimensional  
Positron Emission Tomography  
Express Mail : EV 416351045 US

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**RESPONSE TO NOTICE OF NON-COMPLIANT AMENDMENT  
DATED JANUARY 5, 2004, PAPER NUMBER 6**

Dear Sir:

This Response is filed on behalf of the Applicant in the above-referenced patent application in response to the Notice of Non-Compliant Amendment mailed January 5, 2004. It is deemed to place the application in a condition for allowance.

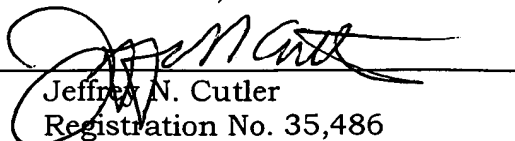
In response to the Notice, attached is the **Amendment to the Claims** section wherein each status identifier "previously presented" has been reworded to read "new".

Please charge any additional fees associated with this communication, or credit any overpayment, to Deposit Account No. 16-1910.

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Respectfully submitted,  
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By

  
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